

# Holy Family Parish Catholic Church Family Registration Form

Thank you for joining our Parish Family. Please help us get to know you better by completing this form.

## Family Information

Full Names- Ms./Mrs.: \_\_\_\_\_ Maiden \_\_\_\_\_ Mr.: \_\_\_\_\_

DOB: \_\_\_\_\_ DOB: \_\_\_\_\_

Occupation: \_\_\_\_\_ Occupation: \_\_\_\_\_

Catholic Yes \_\_\_\_\_ No \_\_\_\_\_ Catholic Yes \_\_\_\_\_ No \_\_\_\_\_

Email Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Marital Status: ( \_\_\_\_\_ ) Married in Catholic Church? [ Y / N ] Custodial Parent: Mother or Father or n/a?

Street Address: \_\_\_\_\_

City and Zip: \_\_\_\_\_ Land Line Number: \_\_\_\_\_

Cell Phone Numbers: Mother ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Father ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Emergency Contact Name and Phone #: \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

***Have your child(ren) received the following Sacraments in the Catholic Church? See below: ▼***

## Children's Information and Religious Formation Information:

<u>Child's Name</u>	<u>D.O.B.</u>	<u>Sex</u>	<u>Grade</u>	<u>School Name</u>	<u>Baptism/1st Comm./Confirmation?</u>
<u>1.</u>	_____	_____	_____	_____	_____
<u>2.</u>	_____	_____	_____	_____	_____
<u>3.</u>	_____	_____	_____	_____	_____
<u>4.</u>	_____	_____	_____	_____	_____

***Any medical conditions, special needs, or dietary restrictions for your child(ren)? No (\_\_\_) YES(\_\_\_)***

**Do you need any sacrament instruction for your child(ren) this school year? (See note below)**

**NO** ( ) My child(ren) do not require any sacrament instruction at this time.

**YES** ( ) I need \_\_\_\_\_ for my child \_\_\_\_\_  
(Sacrament) (Child's Name)

**YES** ( ) I need \_\_\_\_\_ for my child \_\_\_\_\_  
(Sacrament) (Child's Name)

**YES** ( ) I need \_\_\_\_\_ for my child \_\_\_\_\_  
(Sacrament) (Child's Name)

**Note:** First Reconciliation and First Eucharist are usually received in the 2<sup>nd</sup> grade; Confirmation in the 11<sup>th</sup> grade.

DATE \_\_\_\_\_